PREMARKET NOTIFICATION

MAR 2 5 2010

510(k) SUMMARY

(As Required By 21 CFR 807.92)

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR §807.92.

The assigned 510(k) number is: <u>k093831</u> Date: <u>DEC 0 9 2009</u>

1. Submitter:

Health & Life Co., Ltd.

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2. Name of the Device:

Trade Name: Full Automatic (NIBP) Blood Pressure Monitor, Model HL868RT

Common Name: Blood Pressure Monitor

Classification Name: Noninvasive Blood Pressure Measurement System

Classification: Class II

Regulation Number: 21 CFR 870.1130

Product Code: DXN
Panel: Cardiovascular

3. Information for the 510(k) Cleared Device (Predicate Device):

A. Full Automatic (NIBP) Blood Pressure Monitor, Model HL868BF, K092161

B. H&L Full Automatic Blood Pressure Monitor, Model 168ET, K043437

4. Device Description:

HL868RT automatically measures human's Systolic, Diastolic blood pressure and heart rate by using the oscillometric method. All values can be read out in one LCD panel. Measurement position is at human being's upper arm. The intended use of this over-the-counter device is for adults aged 18 years and older with arm circumference ranging from 9 inches to 17 inches (approx. 23 cm to 43 cm) and for home use.

The additional optional talking function equipped of this device can help the user to know how to use the device to measure the blood pressure and the pulse step by step, and let the user know the measurement results by hearing. Besides, the device will display a symbol or the conditional or less than 25% from the average heartbeat intervals during the measurement. Additionally, after measurement, the Risk Category Indicator function will show the information with the readings on the screen for the user tracking their blood pressure level. Furthermore, the user can save and manage the measurement data by transferring the measured readings of blood pressure to the connected personal computer (PC) via USB cable.

5. Intended Use

This device automatically measures human's Systolic, Diastolic blood pressure and heart rate by using the oscillometric method. All values can be read out in one LCD panel. Measurement position is at human being's upper arm. The intended use of this over-the-counter device is for adults aged 18 years and older with arm circumference ranging from 9 inches to 17 inches (approx. 23 cm to 43 cm) and for home use.

When the device detects the appearance of irregular heartbeats during measurement, an indicated symbol will appear with measuring readings. And this device can let the memory data be transferred to the connected personal computer (PC) via USB cable.

6. Comparison of device to predicate device:

Product Specification Comparison Table of HL868RT and HL868BF (K092161)

Item	Predicate HL868BF (K092161)	HL868RT
Method of	Oscillimetric	Same as left
measurement		

		
Range of measurement	Pressure 0- 300mmHg, Pulse 40-199 Beats/minute	Same as left
Accuracy	Pressure +/- 3mmHg Pulse +/- 5%	Same as left
Inflation	Automatic inflation (Air pump)	Same as left
Deflation of Pressure	Automatic air release control valve	Same as left
Exhaust	Automatic exhaust valve	Same as left
Display	Liquid Crystal Digital Display	Same as left
Power Supply	6V DC, 4 × "AA" (1.5V) Alkaline batteries or AC adapter (optional)	Same as left
Storage Temperature	-20° C ~ + 70° C (- 4° F~ + 158° F), ≤ 90%RH	Same as left
Operating Temperature	10°C ~40°C (50°F~104°F), 15% ~90%RH	Same as left
Sets of memory	3*80, total 240	2*60, total 120
Number of Push Bottom	5	7
Storage pouch	Yes	Same as left
Cuff size	Arm circumference approx. 23-43 cm (9~17 inches)	Same as left
Unit Weight	Approx. 312g excluding batteries	Approx. 293 ± 5g excluding batteries

Changes from the predicate devices HL868BF (K092161):

^{* 7} push buttons, changing of exterior casing design

^{*} Additional product features of Risk Category Indicator, and Talking Function
For the product feature of Talking Function, was compared with the other predicate
device H&L Full Automatic Blood Pressure Monitor, Model 168ET(K043437)

7. Discussion of Clinical Tests Performed:

HL868RT is compliant to the ANSI/AAMI SP-10:2002+A1:2003+A2:2006 Standard for Manual, electronic, or automated sphygmomanometers. All the relevant activities were performed by designate individual(s) and the results demonstrated that the predetermined acceptance criteria were fully met.

8. Discussion of Non-Clinical Tests Performed for Determination of Substantial Equivalence are as follows:

The subject device was tested to evaluate its safety and effectiveness, including the followings:

- a. Safety Test: IEC 60601-1:1988+A1:1991+A2:1995 Medical electrical equipment Part 1: General requirements for basic safety and essential performance
- EMC Test: IEC 60601-1-2:2001+A1:2004 Medical Electrical Equipment Part 1-2:
 General requirements for safety collateral standard: Electromagnetic compatibility Requirements and Test
- c. Reliability Test: ANSI/AAMI SP-10:2002+A1:2003+A2:2006
- d. **Risk Assessment**: ISO 14971:2007 Medical devices Application of risk management to medical devices
- e. Software Verification and Validation: IEC 62304 Ed. 1.0, Medical device software Software life cycle processes. (Software/Informatics) and IEC 60601-1-4:2000 Consol.
 Ed. 1.1, Medical electrical equipment Part 1-4: General requirements for safety -Collateral standard: Programmable electrical medical systems
- f. Usability Validation: IEC 62366 Medical devices Application of usability engineering to medical devices

9. Conclusions:

The subject device was tested and fulfilled the requirements of those standards mentioned above, and it's concluded that the subject device is substantially equivalent to the predicate devices.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room W-066-0609 Silver Spring, MD 20993-0002

MAR 2 5 2010

Health and Life Co., Ltd. c/o Ms. Sara Su Deputy Manager 9F., No. 186, Jian Yi Road Chung Ho City, Taipei County TAIWAN 235 R.O.C.

Re: K093831

Trade/Device Name: Full Automatic (NIBP) Blood Pressure Monitor, Model HL868RT

Regulatory Number: 21 CFR 870.1130

Regulation Name: Non-invasive Blood Pressure Measurement System

Regulatory Class: II (two) Product Code: DXN Dated: January 7, 2010 Received: January 25, 2010

Dear Ms. Su:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

Indication for Use

510(k) Number (if known): <u>k093831</u>

Device Name: Full Automatic (NIBP) Blood Pressure Monitor, Model HL868RT

Indications for Use:

This device automatically measures human's Systolic, Diastolic blood pressure and heart rate by using the oscillometric method. All values can be read out in one LCD panel. Measurement position is at human being's upper arm. The intended use of this over-the-counter device is for adults aged 18 years and older with arm circumference ranging from 9 inches to 17 inches (approx. 23 cm to 43 cm) and for home use.

When the device detects the appearance of irregular heartbeats during measurement, an indicated symbol will appear with measuring readings. And this device can let the memory data be transferred to the connected personal computer (PC) via USB cable.

Prescription Use _____ AND/OR Over-The-Counter Use ___ V (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)

Concurrence of CDRH, Office of Devices Evaluation (ODE)

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(Division Sign-Off)

Division of Cardiovascular Devices

510(k) Number